# DIVISION OF MEDICAID POLICY UPDATE May 2016

### **ADMINISTRATIVE RULES**

	16-0309-1601 Home Health and Durable M	ledical Equipment (DME)
	These rule changes are needed to better ensur	e program integrity, to increase access to medically
	necessary care, and to align the chapter with recent changes regarding Home Health and Durable	
	Medical Equipment (DME) in federal regulation	ions.
	These rule changes will:	
	1. Add a requirement for a face-to-face enco	unter documented by the ordering provider prior to
	delivery of services or equipment and supplies for Home Health and DME providers; and	
	2. Clarify that Home Health and DME cannot be restricted to services provided in the home, and	
Docket 16-0309-1601	that they may be provided in any setting in wl	nich normal life activities take place.
	Negotiated Rulemaking	N/A
	<b>Negotiated Written Comment</b>	N/A
	Published as temp/proposed	10/05/2016
	<b>Comment period ends</b>	10/26/2016
	Changes to rules based on comment	10/04/2016
	submitted to APS	
Õ	Pending rule publish	01/04/2016

### 16-0310-1601 Changes to Hospice reimbursement rates

This rulemaking aligns this chapter of rules with recent changes in federal regulations (42 CFR 418.302) due to go into effect January 1, 2016.

There is an estimated increase of \$213,000 in annual aggregate expenditures as a result of this rulemaking. \$64,000 of this will come from the State General Fund; the remaining \$149,000 will come from federal matching funds.

This rulemaking is needed to revise reimbursement for Medicaid hospice providers. These rule changes will align this chapter of rules with recent changes in federal regulations (42 CFR 418.302).

Specifically, these rule changes implement a two-tiered routine home care reimbursement for hospice providers, and add a new service intensity add-on payment to the hospice payment methodology for Medicaid.

Negotiated Rulemaking	N/A
Negotiated Written Comment	N/A
	06/01/2016 (Vol. 16-6)
Published as temp/proposed	06/06/2016 (Vol. 16-7)
Comment period ands	06/22/2016 (Vol. 16-6)
Comment period ends	07/27/2016 (Vol. 16-7)
Changes to rules based on comment	
submitted to APS	
Pending rule publish	01/04/2017 (vol. 17-1)

# Docket 16-0310-1601

### 16-0310-1602 Medicaid Enhanced Plan Benefits

During the review and promulgation process for last year's substantial overhaul of the Home and Community Based Services (HCBS) rules in IDAPA 16.03.10, "Medicaid Enhanced Plan Services," (and the companion rule changes in IDAPA 16.03.13, "Consumer-Directed Services,"), stakeholders indicated ongoing difficulty in navigating and reviewing the HCBS waiver rules spread between the two chapters. To address this, the HCBS rules are being moved out this chapter and consolidated in a single rewritten and substantially expanded new IDAPA chapter 16.03.13, entitled: "Home and Community Based State Plan Option and Waiver Services." These rule changes will remove the rules in this chapter related to HCBS, and make technical corrections and updates will remove the rules in this chapter text where needed. (Including updates to citations).

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citations).		
Negotiated Rulemaking	06/17/2016	
Negotiated Written Comment		
Published as temp/proposed	10/05/2016	
Comment period ends	10/26/16	
Changes to rules based on comment submitted to APS		
Pending rule publish	01/04/2017	

### 16-0313-1601 Consumer Directed Services

During the review and promulgation process for last year's substantial overhaul of the Home and Community Based Services (HCBS) rules in IDAPA 16.03.10, "Medicaid Enhanced Plan Services," (and the companion rule changes in IDAPA 16.03.13, "Consumer-Directed Services,"), stakeholders indicated ongoing difficulty in navigating and reviewing the HCBS waiver rules spread between the two chapters. To address this, the current IDAPA 16.03.13 is being repealed and rewritten so that the HCBS rules can be moved out of IDAPA 16.03.10 and consolidated in a single rewritten and substantially expanded new IDAPA chapter 16.03.13, entitled: "Home and Community Based State Plan Option and Waiver Services." This chapter of rules is being repealed in its entirety

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Negotiated Rulemaking	06/17/2016	
Negotiated Written Comment		
Published as temp/proposed	10/05/2016	
Comment period ends	10/26/2016	
Changes to rules based on comment		
submitted to APS		
Pending rule publish	01/04/2017	

Docket 16-0313-1602

Docket 16-0313-1601

# 16-0313-1602 Home and Community Based State Plan Option and Waiver Services During the review and promulgation process for last year's substantial overhaul of the Home and Community Based Services (HCBS) rules in IDAPA 16.03.10, "Medicaid Enhanced Plan Services," (and the companion rule changes in IDAPA 16.03.13, "Consumer-Directed Services,"), stakeholders indicated ongoing difficulty in navigating and reviewing the HCBS waiver rules spread between the two chapters. To address this, the current IDAPA 16.03.13 is being repealed and rewritten so that the HCBS rules can be moved out of IDAPA 16.03.10 and consolidated in a single rewritten and substantially expanded new IDAPA chapter 16.03.13, entitled: "Home and Community Based State

Plan Option and Waiver Services." This chapter of rules is being rewritten, reorga and substantially expanded to include all the rules related to HCBS waivers in one chapter. It will also contain the rules related to Consumer-Directed Services that is currently.	
Negotiated Rulemaking	06/17/2016
<b>Negotiated Written Comment</b>	
Published as temp/proposed	10/05/2016
Comment period ends	10/26/2016
Changes to rules based on comment submitted to APS	
Pending rule publish	01/04/2017

### 16-0318-1601 Medicaid Cost Sharing

This rulemaking confers a benefit to Home and Community Based Services waiver participants by increasing their Personal Needs Allowance (PNA). These rule changes increase the PNA from 150% of the federal SSI amount to 180% of the federal SSI amount for eligible waiver participants who incur a mortgage or rent expense. The total anticipated cost of this rule change is projected to be \$1,524,158 per year, due to the reduced participant Share of Cost for Medicaid waiver services. The SFY17 blended rate Federal Medical Assistance Percentage (FMAP) is 70.91%. The impact to the state general fund is projected to be \$443,377 per year, based on current participant counts. This rule change will result in an increased cost of \$443,337 per year in state general funds and \$1.080,780 in federal dollars

Docket 16-0310-1601

runds and \$1,080,780 in federal dollars	
Negotiated Rulemaking	
<b>Negotiated Written Comment</b>	
Published as temp/proposed	06/01/2016
Comment period ends	04/22/2016
Changes to rules based on comment submitted to APS	
Pending rule publish	01/04/2017

### RULES COMING SOON-TEMP/PROPOSED

Alignment with Federal Medicaid Pharmacy Regulations Timely Filing

### STATE PLAN AMENDMENTS TITLE XIX

16-001 PCCM

Tribal coordinator notified 8/28/2015

Submitted to CMS 3/23/2016 - 90 Day Clock 6/21/2016

16-002 Health Homes

Tribal coordinator notified 8/28/2015

Submitted to CMS 3/25/16 – 90 Day Clock 6/23/16

16-003 Children's 1915(i) State Plan HCBS review

Tribal coordinator notified 2/2/2016

Submitted to CMS 3/02/2016 – 90 Day Clock 5/31/2016

Informal question received from CMS 4/14/2016 due 5/11/2016

Response submitted to CMS 5/11/2016

Informal question received from CMS 05/13/2016

Response submitted to CMS 5/16/2016

16-005 LARC

Tribal coordinator notified 4/8/2016

16-006 PCS Personal Care Services

Tribal coordinator notified 3/18/2016

## **SPA COMING SOON**

Adult 1915(i) HCBS updates (Sept)

Community Based Rehabilitation Services (CBRS) in schools

### STATE PLAN AMENDMENTS TITLE XXI

### Title XXI SPA #17 PCCM Changes

Tribal coordinator notified 8/28/2015

### TITLE XXI COMING SOON

### **WAIVER ACTIVITY**

QA Report ERP A&D and DD Adult 1915c

**Submitted 12/31/15** 

Questions received 4/22/16 Responses due 7/31/16

WVR 15-01 IBHP (b) Waiver renewal

**Tribal Coordinator Notified 3/18/15** 

Submitted to CMS 6/1/2015 Informal RAI received 6-11-2015 RAI response submitted 6/16/15

Formal RAI received 8/20/15 - 90 day clock is 11/17/15

**Temporary Extension through 6/30/16** 

### WAIVER AMENDMENTS COMING SOON

HCBS Waiver changes (May) Dental 1915(b) renewal (October)

Waiver changes ResHab (August)